

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICANS FOR ACCOUNTABILITY IN LEADERSHIP			FEC IDENTIFICATION NUMBER ▼ C C00514224		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			M M / D D / Y Y Y Y Y Y		
Full Name (Last, First, Middle Initial) of Payee GATEWAY MEDIA			Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012		
Mailing Address 2150 RIVER PLAZA DR. #150			Amount 9795.00		
City SACRAMENTO State CA Zip Code 95833		Transaction ID : EDT.E.9			
Purpose of Expenditure PHONEBANKS OPPOSING GARAMENDI CA03		Category/Type 24A		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN GARAMENDI		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought 83171.45		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
Full Name (Last, First, Middle Initial) of Payee			Date		
Mailing Address			M M / D D / Y Y Y Y Y Y		
City State Zip Code			Amount		
Purpose of Expenditure		Category/Type		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose			
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			9795.00		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶			9795.00		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature DAVID BAUER		[Electronically Filed]		Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	